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13. The overall project objectives are to: <ol style="list-style-type: none"> <li>1. Describe the patterns of illnesses among Gulf War veterans in the two clinical registries and evaluate whether the patterns of illnesses among Gulf War veterans vary by potential wartime exposures;</li> <li>2. Assess changes in health status of veterans as individuals and as a group over time; and</li> <li>3. Describe the patterns of illnesses among the family members of veterans evaluated in the two clinical registries; and,</li> </ol> <p>The merging of military and demographic data from the DMDC roster files, clinical data from the DoD CCEP and the VA Gulf War Health Examination Registry (PGR), DoD Hospitalization file, CHPPM's DMDC conflict file with UIC data and the DoD anthrax data file has been completed.</p> <p>The initial tables describing demographic, military and medical (both symptoms and diagnoses) characteristics of 49,079 veterans on the old VA PGR, 21,306 veterans on the new VA PGR and 32,876 veterans on the DoD CCEP are being generated. Variables to be used in the tables were identified; the data were edited; and variables that completed the data editing process were evaluated. The initial 80 tables stratified by gender, rank and branch of service will be completed in two months.</p>			
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*Harold W. McCaughy*  
Principal Investigator's Signature

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**Introduction:**

It is possible to conduct a combined analysis of the two Gulf War clinical registries because of similar methodology and ICD-9-CM coding of diagnoses. This analysis will allow for the assessment of clinical data from comprehensive clinical examinations of over 100,000 veterans, which represents ~ 15% of all U.S. forces deployed in the Gulf War, and will also provide clinical data on the spouses and children of Gulf War veterans. Due to the self-referred nature of the registry population and the absence of a comparable control group, statistical analysis of this database has to be done with caution. Nevertheless, because such a large proportion of Gulf War veterans have been systematically evaluated over an extended 6-year period, the findings of this combined analysis will add substantially to our understanding of the health problems experienced by Gulf War veterans.

The overall project objectives are to:

1.     Describe the patterns of illnesses among Gulf War veterans in the two clinical registries;
  
2.     Evaluate whether the patterns of illnesses among Gulf War veterans vary by potential wartime exposures;

3. Assess changes in health status of veterans as individuals and as a group over time – pre-Gulf War, during deployment, and after the war;
4. Describe the patterns of illnesses among the family members of veterans evaluated in the two clinical registries; and,
5. Establish a linked database of both registries that can be updated with new clinical assessments and utilized in future clinical and research efforts to help understand military veterans health problems.

## II. Research Accomplishments:

In keeping with the study protocol, the VA Environmental Epidemiology Service (EES) has completed the merging of military and demographic data from the DMDC roster files, clinical data from the DoD CCEP and the VA Gulf War Health Examination Registry (PGR), DoD Hospitalization file, CHPPM's DMDC conflict file with UIC data and the DoD anthrax data file. Because of privacy issues related to the sensitive nature of the data, an individual's SSN was replaced with a unique personal identification number (PIN) generated for each of the 1,136, 077 persons identified by DMDC as individuals who have ever been deployed to the Gulf theater as of October 1999. This includes both "conflict"

and "theater veterans. These merged data files were sent to the Naval Health Research Center for further evaluation.

The initial tables describing demographic, military and medical (both symptoms and diagnoses) characteristics of 49,079 veterans on the old VA PGR, 21,306 veterans on the new VA PGR and 32,876 veterans on the DoD CCEP are being generated. Variables to be used in the tables were identified; the data were edited; and variables that completed the data editing process were evaluated. The initial 80 tables stratified by gender, rank and branch of service will be completed in two months.

### III. Conclusions:

The initial monograph reporting study findings has been started. Preliminary tables showing descriptive data and basic comparisons have been generated by VA's EES and NIHRC.